

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

🕨 Do not enter social security numbers on this form as it may be made publiçព្ ► Go to www.irs.gov/Form990 for instructions and the latest information.

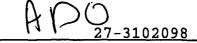
Open to Public Inspection

<u> A I</u>	For th	e 2017 calendar year, or tax year beginning OCT 1, 2017 and ending	SEP 30, 2018
В	Check if	C Name of organization SOLAR & ENERGY LOAN FUND OF	D Employer identification number
	Addr	ess Tracto Corpumit Trac	
	Nam-	Doing business as	27-3102098
	initia retun	Number and street (or P.O. box if mail is not delivered to street address) Room/s	<u> </u> – •
	☐Final retun		772-468-1818
	term: ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$ 1,282,274.
	Amer	ided pm prepare et 240E0	H(a) is this a group return
	Appli		for subordinates? Yes X No
	pend		95 H(b) Are all subordinates included? Yes No
1 7	Tay.ey	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) of 5 寸	
		te: NWW.STLUCIECO.GOV/ED/EMPOWER.HTM	H(c) Group exemption number
			ear of formation: 2010 M State of legal domicile: FL
	art I	Summary	ear of formation. 2010 M State of legal domicile. FL
_	1	Briefly describe the organization's mission or most significant activities: ENHANCE	CONSUMER ACCESS TO CLEAN
Governance	'	ENERGY TECHNOLOGIES BY PROVIDING ENERGY EXPE	
Ē	2	Check this box if the organization discontinued its operations or disposed of n	
Ver		Number of voting members of the governing body (Part VI, line 1a)	3 6
Ĝ	3	and the same of th	
	4	Number of independent voting members of the governing body (Part VI, line P) ECE1 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	VED 6
Ë	I	Total number of individuals employed in calendar year 2017 (Part V, line 22)	
Activities &	1	Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34	
Aç	1	Total unrelated business revenue from Part VIII, column (C), line 12 AN 07.	2019 O 7a 0.
	ь	Net unrelated business taxable income from Form 990-T, line 34	7b 0.
		OCDEN	Prior Year Current Year
ē	8	Contributions and grants (Part VIII, line 1h)	<u>UT 212,177.</u> 775,429.
Revenue	9	Program service revenue (Part VIII, line 2g)	58,739. 280,904.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	165,241. 177,170.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	30,735. 48,626.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	466,892. 1,282,129.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0. 0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
ဟ	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	421,308. 565,121.
Expenses	l	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
per		Total fundraising expenses (Part IX, column (D), line 25)	
Ä		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	238,360. 290,199.
		Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25)	659,668. 855,320.
		Revenue less expenses. Subtract line 18 from line 12	<192,776.> 426,809.
-88	19_	neveriue less experises. Subtract line 10 from line 12	Beginning of Current Year End of Year
Net Assets or Fund Balances	-00	Total assets (Dark V. Ivas 46)	4,079,968. 4,966,746.
Bass	20	Total assets (Part X, line 16)	
三	21	Total liabilities (Part X, line 26)	3,490,530. 3,950,499.
禹	22	Net assets or fund balances. Subtract line 21 from line 20	589,438. 1,016,247.
		Signature Block	to an and to the treat of any local data and to the first
		lties of perjury, I declare that I have examined this return, including accompanying schedulos and sta	
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prepare	
		Month Come	12-21-18
Sign	1	Signature of officer	Date
Here	•	DOUG COWARD, EXECUTIVE DIRECTOR Type or print name and title	
		Print/Type preparer's name Preparer's stgnature	Date Check PTIN
Paid		J.W. GAINES	self-employed P00770426
Prep		Firm's name BERGER, TOOMBS, ELAM, GAINES & FRANK	
Use (Firm's address 600 CITRUS AVENUE, SUITE 200	
	,	FT. PIERCE, FL 34950	Phone no. (772)461-6120
NA=-	Abs IF		X Yes No
widy	me it	S discuss this return with the preparer shown above? (see instructions)	LAL TES LINO

728,079.

732002 11-28-17

Total program service expenses



			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	↓_
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3_		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u> </u>		
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			1
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	ľ		ľ
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
-	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	1		ł
	If "Yes," complete Schedule D, Part IV	9		_x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10_		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_ <u>X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		.,	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	122	\mathbf{x}_{\perp}	
_	Schedule D, Parts XI and XII	12a	Λ.	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	405	ľ	_x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	+	_ <u>X</u>
13		14a		X
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1444		
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	.		
	or more? If "Yes, complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		$_{\mathtt{X}}$
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		T	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	- 1	X

- Form 990 (2017)

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
~ 2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
Ŀ	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			ł
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			1
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		-	
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1 1		1
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	1 1		1
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1 1		l I
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			i
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1;		1 4 4
	instructions for applicable filing thresholds, conditions, and exceptions):	۱ ، س		r = 1 4
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С			Į.	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		l	
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			**
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		- 1	v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	054]	
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	20		v
27	If "Yes," complete Schedule R, Part V, line 2	36	+	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		X
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37	+	42
JO	Note. All Form 990 filers are required to complete Schedule O	38	x	
	Note. All Form 950 ners are required to complete ochequie o	Form		 2017\
		. 5000	12	/

	SOLAR & ENERGY DOAN FOND OF			
	n 990 (2017) ST LUCIE COUNTY, INC 27-3102	<u> 1098</u>	3	Page
Pa	ort V Statements Regarding Other IRS Filings and Tax Compliance			
	*Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	, <u> </u>	Τ.	75.00
b		il:	1.	الجرالة
C		13		1.3
_	(gambling) winnings to prize winners?	10		, ~
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		1,5	. 5:
	filed for the calendar year ending with or within the year covered by this return2a9	:		S. T.
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
b	• • • • • • • • • • • • • • • • • • • •	20	- A	1.
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2-	6-	X
3a		3a	┼──	 ^
b	, , , , , , , , , , , , , , , , , , , ,	3b	┼──	+
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	١.		٠,
_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	┼	X
þ	If "Yes," enter the name of the foreign country: ▶	}	-	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		. •	1 25
5a		5a	├ —	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	 	X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	└	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	1		
	any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	1	1	1
	were not tax deductible?	6b		Ļ
7	Organizations that may receive deductible contributions under section 170(c).		1.1	1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		_	F 100
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	1		
	sponsoring organization have excess business holdings at any time during the year?	8	, ·	 ~~ ``
9	Sponsoring organizations maintaining donor advised funds.			3
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		· -	17.50
a	Initiation fees and capital contributions included on Part VIII, line 12	,	ں ب	. 16
b		1:	· .	پ ت نیزر ا
11	Section 501(c)(12) organizations. Enter.		' <u>'</u> -	
	Gross income from members or shareholders	, ÷,	.,	18
a		7.5	-	ww.
D	Gross income from other sources (Do not net amounts due or paid to other sources against	· . [, i,	1
10	amounts due or received from them.)	<u> </u>	- سر	شتش
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	, , <u>;</u>	L-E
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1.	* * ·	<u>.</u>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	4-		· zewy."
а	is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	۱ ۱	,	4 24.4
þ	Enter the amount of reserves the organization is required to maintain by the states in which the	: .[[جي	2 7.5
	organization is licensed to issue qualified health plans	- 1	•••	الياب

14a

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

27-3102098

Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 6 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? X 5 5 X 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8h Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . 12c 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? ., . a The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b 7 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a ٠.4 taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: DUANNE ANDRADE - 772-468-1818

Form 990 (2017)

FL

2400 RHODE ISLAND AVENUE, FT PIERCE,

732006 11-28-17

Form 990 (2017) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average	(de	not s	Pos	C) ition) than	one	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	box	(do not check more than one box, unless person is both an officer and a director/trustee)				h an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) KYLE ABNEY	3.00			}						
PRESIDENT		X	<u> </u>	X	<u> </u>		-	0.	0.	0.
(2) THOMAS T COOPER	2.00			l						
SECRETARY		X		X				0.	0.	0.
(3) FRAN ROSS	2.00			~-				0	0	0
VICE PRESIDENT	2.00	X_		X				0.	0.	0.
(4) BRIDGETTE DALEY TREASURER	2.00	x		x				0.	0.	0.
(5) KRISTEN GUETTLER	1.00	^		Λ						
MEMBER		x						0.	0.	0.
(6) SCOTT MCCRACKEN	1.00								-	
MEMBER		X						0.	0.	0.
(7) YVETTE MURRAY	1.00									
MEMBER		X						0.	0.	0.
(8) DOUG COWARD	40.00								_	
EXECUTIVE DIRECTOR				X				93,842.	0.	0.
(9) DUANNE ANDRADE	40.00							04 200	0	0
CHIEF FINANCIAL OFFICER				_		-		84,200.	0.	0.
	<u> </u>									
										
		_								
			-	_	7					
				_	+	\dashv	\dashv			
						_	-			

Form 990 (2017)

_	_								_	_	_			
S	T	1	ιIJ	CI	E	C	OT	IN	T	7.		TI	VC	ŧ

	rt VII Section A. Officers, Directors, Tr (A)	(B)			((C)			(D)	(E)		(F)
	Name and title	Average hours per week	offi	not c , unle cer an	ss pe	more rson i	than is bot	h an	Reportable compensation from	Reportable compensation from related	ar	stimated nount of other
		(list any hours for related organizations	ustee or director	trustee		e e	pensated		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fi	pensation om the anization
		below line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest com employee	Former			h	d related anizations
											-	
						_	_				 	
										 		
					_	-	_	_			 	
					4			_			-	
				_	-	-	-					
				_	_		\dashv				-	
1b	Sub-total					<u></u>		>	178,042.	0		0
	Total from continuation sheets to Part		٠				((>	0. 178,042.	0	_ +	0
2	Total number of individuals (including but compensation from the organization	not limited to the	ose	liste	d ab	ove)) wh	o re	ceived more than \$100,	000 of reportable		(
3	Did the organization list any former office	er, director, or true	stee	, key	/ em	ploy	/ee,	or h	nighest compensated en	nployee on		Yes No
	line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the s									 ne organization	3	X
5	and related organizations greater than \$100 Did any person listed on line 1a receive or									 lual for services	4	X
	rendered to the organization? If "Yes," continued in B. Independent Contractors	mplete Schedule	J fo	r su	ch p	erso	on				5	<u> </u>
	Complete this table for your five highest c the organization. Report compensation fo	•									sation fr	om
	(A) Name and busines	s address	NO	NE					(B) Description of se	rvices	(C) Compen	
												
2	Total number of independent contractors				4		. lć			n than &		·

Form 990 (2017) ST LUCIE COUNTY, INC Part VIII Statement of Revenue

W 43	<u> </u>	Check if Schedule O contains a re	esponse	or note to any l	ine in this F	Part VIII			
					g (4	A) evenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts. Grants and Other Similar Amounts	1 :	a Federated campaigns	1a			他是是			
ir our	l i	b Membership dues	1b					"你是我们的	
کے ق	١,	c Fundraising events	1c			النادياء أيدو أبيا ولاية ما والوائد البية		This was a second	
a ii	ĺ	d Related organizations	1d			7.41			
S,E	١,	e Government grants (contributions)	1e	745,000.					
ନ୍ଧିତ		f All other contributions, gills, grants, and							
a E	•	similar amounts not included above	11	30,429.					
፮δ		Noncash contributions included in lines 1a-1f \$							
a Ç	٠ -	h Total. Add lines 1a-1f		•	775	,429	である。 では、 では、 では、 では、 では、 では、 では、 では、		
				Business Code	55 75 75 4 T VOW.	SECTION OF	1967年	海南部沿外	にはいるとうない。
Ð	2 =	CONTRACT SERVICE RE	VEN	99999		,000.	175,000.	AND THE PROPERTY OF THE PROPER	The street of th
Š		APPLICATION FEES		99999		,904			
Ser		o milbichillon ibbb		-	100	101	203/5010	 	
E S	_	·			<u> </u>		· · · · · · · · · · · · · · · · · · ·		
Re									
Program Service Revenue	E	All other program service revenue			 		 	 	
	1	Total. Add lines 2a-2f		_	280	904	THE WAR WAS	TENERAL MENTERS	D. T. S.
		Investment income (including dividence	de untere		200	, <u> </u>	With the desiration of the state of	Antibered, 400 alst 1 of	A Library and a limit bash and before the same for all
	3		15, iiiteie	, and	177	,315.			177,315.
		other similar amounts)	 4 bond n			, , , , , , ,	 		111,313.
	4	Income from investment of tax-exemp	t bona p	roceeds	 		 	 	
	5	Royalties		(3.5)	10 TO 12 TO 15	ST#6"2 v 6847"	新了000000000000000000000000000000000000		CAUCH A THAT DESCRIPTION
ľ		· · · · · · · · · · · · · · · · · · ·	Real	(ii) Personal	16.00 M				
	6 a	· · · · · · · · · · · · · · · · · · ·							
.		Less: rental expenses		<u> </u>	ARCH TOTAL				
		: Rental income or (loss)		<u> </u>	THAT	CONTRACT	AND SECTION THAN	E TELEVISION DE LA COMPANION D	WHATTERNESS
		Net rental income or (loss)			\$100 A. H. B. B. C.	- Pake 24.53	MAN TEN SATURES LANGE MANAGER	Marketables - Ort Fail	大いくう。からなって主義を発する。
	7 a		unties	(ii) Other					
į		assets other than inventory		<u> </u>					
}	b	Less: cost or other basis			The state of the s				
		and sales expenses	· .	145.					
7	C	Gain or (loss)		<145.			ACCEPTANCE OF	FACTOR OF SECTION	在了一个一个
l	d	Net gain or (loss)			According to Care at the	<u><145.</u>	> <145.	>	Pro will a life be as labelled to
힐	8 a	•	(not		T. A.				
盲			of	i					
١		contributions reported on line 1c). See)				多种技术等等		
in in		Part IV, line 18 , , , ,	a						
Other Reven	b	Less: direct expenses	b			於於實際			
٠	Ç	Net income or (loss) from fundraising e	events	▶			第二次是一个一个	1	Water at 12 Marian at 140
ľ	9 a	Gross income from gaming activities.	See	. —					
	•	Part IV, line 19	а						
	b	Less: direct expenses '	ь		建設課			ELECTRICAL	
	С	Net income or (loss) from gaming activ	ities .	<u> </u>					
J	10 a	Gross sales of inventory, less returns	J						
	•	and allowances	а	, <u> </u>		发现研究			
	. p	Less: cost of goods sold	ь			是古典的	新手灣。 海亞德蘭		
4	С	Net income or (loss) from sales of inver	ntory	▶					
		Miscellaneous Revenue		Business Code	1000 · 1	ر من المراجعة المن المراجعة المراجعة	San The Control of the Control	影響的問題語	
ſ	11 a	OTHER INCOME		541610	48	626.	48,626.		
	b								
- 1	С								
- 1	d	Ali other revenue							
	е	Total. Add lines 11a-11d		🕨	48	626.	是位置,那些是	是一些是一种	公共和长的政策
	12	Total revenue. See instructions.			1,282	129.	329,385.	0.	177,315.
732009	11.20							· · · · · · · · · · · · · · · · · · ·	Form 990 (2017)

732009 11-28-17

ST LUCIE COUNTY, INC

Part IX Statement of Functional Expenses

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	n this Part IX (B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21			Service Services	
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22			The state of the s	The second second
3	Grants and other assistance to foreign			The state of the s	
	organizations, foreign-governments, and foreign				
	Individuals. See Part IV, lines 15 and 16			The second second second	The state of the s
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees		}		
6	Compensation not included above, to disqualified				<u> </u>
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			[!
7	Other salaries and wages	486,113.	408,335.	72,917.	4,86
8	Pension plan accruals and contributions (include				-1-0
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	38,020.	31,937.	5,703.	38
10	Payroll taxes	40,988.	34,430.		41
11	Fees for services (non-employees):				
а	Management			·	
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		AND PROPERTY.	12.12.12.14.14.14.14.14	
	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25,				_
	column (A) amount, list line 11g expenses on Sch O.)	9,373.			9
	Advertising and promotion .	43,577.			43
	Office expenses	14,993.	12,594.	2,250.	14
	Information technology				
	Royalties	. 20 400	27 216	1 050	32
	Occupancy	·32,400.	27,216. 19,337.	4,860. 3,453.	23
7	Travel	23,020.	13,33/•	3,433.	
	Payments of travel or entertainment expenses			,	
	for any federal, state, or local public officials Conferences, conventions, and meetings				
-	Interest	75,509.	63,428.	11,326.	75!
-	Payments to affiliates	10,000	05,420.	11,020.	
	Depreciation, depletion, and amortization	9,430.	7,921.	1,413.	9(
	Insurance	2,208.	1,855.	331.	2:
4	Other expenses, Itemize expenses not covered	WAR STREET			
-	above. (List miscellaneous expenses in line 24e. If line 🖫				阿拉拉斯
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	· · · · · · · · · · · · · · · · · · ·		於為議論的	5、数字等 10 数字
	BAD DEBT	33,702.	33,702.		
b	LICENSES & FEES	11,452.	10,307.	1,030.	11!
С	REPAIRS & MAINTENANCE	9,174.	7,706.	1,376.	9:
d	LOAN COSTS	6,108.	6,108.		
	All other expenses	19,253.	16,111.	2,949.	19:
5	Total functional expenses. Add lines 1 through 24e	855,320.	728,079.	119,084.	8,15
	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

<u>Par</u>	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	<u> </u>		<u>,,,, , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,</u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	578,019.	1	1,045,402
}	2	Savings and temporary cash investments	1,038,475.	2	409,047
	3	Pledges and grants receivable, net	126,358.		700,000
	4	Accounts receivable, net	22,339.	4	41,349
-	5	Loans and other receivables from current and former officers, directors,	The state of the s	1	SANTON CONTRACTOR OF THE PROPERTY OF THE PERSON OF THE PER
ľ	-	trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L	- AND LINES LET . WHINE!	5	STREET STREET,
- [6	Loans and other receivables from other disqualified persons (as defined under		記述	REPRESENTATION OF THE PARTY OF
_]		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		3	
		employers and sponsoring organizations of section 501(c)(9) voluntary			
n l		employees' beneficiary organizations (see instr). Complete Part II of Sch L	,	6	Se the section appearing a factor
Assets	7	Notes and loans receivable, net	2,253,782.	7	2,683,161
8	8	Inventories for sale or use	<u> </u>	8	270007202
	9	Prepaid expenses and deferred charges	4,718.	9	2,923
- 1	10a	Land, buildings, and equipment: cost or other	The second second	STANS.	的特别是ERHSTENNO
		basis. Complete Part VI of Schedule D 10a 81,488			THE STATE OF THE S
ĺ	ь	Less accumulated depreciation 10b 74,885.		10c	6,603
	11	Investments - publicly traded securities		11	3,7,0,0
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11	40,202.	13	69,050
	14	Intangible assets	1,230.	14	548
	15	Other assets. See Part IV, line 11	0.	15	8,663
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,079,968.	16	4,966,746
7	17	Accounts payable and accrued expenses	321,241.	17	764,268
- 1	18	Grants payable		18	
	19	Deferred revenue		19	
- ;	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
,	22	Loans and other payables to current and former officers, directors, trustees,	Miles San		The same of the same
		key employees, highest compensated employees, and disqualified persons	医静脉 马克德	150	
;		Complete Part II of Schedule L		22	
· :	23	Secured mortgages and notes payable to unrelated third parties		23	
- }:	24	Unsecured notes and loans payable to unrelated third parties	2,815,583.	24	3,028,161
:	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			II
		Schedule D	353,706.	25	158,070
<u>با</u>	26	Total liabilities, Add lines 17 through 25	3,490,530.	26	3,950,499
		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🛣 and		4.6	
		complete lines 27 through 29, and lines 33 and 34.	型形式 主要主意		
2	27	Unrestricted net assets	463,080.	27	316,247
1	28	Temporanly restricted net assets	126,358.	28_	700,000
1		Permanently restricted net assets	A CALLED TO A CONTROL OF THE CONTROL	29	AMERICA CONTRACTOR AND ADDRESS OF A CONTRACTOR
		Organizations that do not follow SFAS 117 (ASC 958), check here			
		and complete lines 30 through 34.		到提	
3	30	Capital stock or trust principal, or current funds		30	
3		Paid in or capital surplus, or land, building, or equipment fund		31	
3	32	Retained earnings, endowment, accumulated income, or other funds		32	
3	33	Total net assets or fund balances	589,438.	33	1,016,247
م ا	34	Total liabilities and net assets/fund balances	4,079,968.	34	4,966,746.

Both consolidated and separate basis

2¢

За

Form 990 (2017)

X

732012 11-28-17

X Separate basis

Act and OMB Circular A-133?

Consolidated basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

review, or compilation of its financial statements and selection of an independent accountant?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization SOLAR & ENERGY LOAN FUND OF Employer identification number ST LUCIE COUNTY, INC 27-3102098 Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university. 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. I Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed in your governing document? (iii) Type of organization (v) Amount of monetary (vi) Amount of other (i) Name of supported (ii) EIN (described on lines 1-10 support (see instructions) support (see instructions) organization Nο Yes above (see instructions))

- 71

- CALLE - 7

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Schedule A (Form 990 or 990-EZ) 2017 ST LUCIE COUNTY, INC 27-3102098 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support			•			
Cale	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and			}			
	membership fees received. (Do not						
	include any "unusual grants.")	251,472.	217,711.	85,648.	212,177.	775,429.	1542437.
2	Tax revenues levied for the organ-				ļ		
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	251,472.	217,711.	85,648.	212,177.	775,429.	1542437.
5	The portion of total contributions	此法的接続	第三条数据		THE PARTY	通常整理企	
	by each person (other than a		## 1 TO				
	governmental unit or publicly				STATE STATE	Eight tride	-
•	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)	计编码 "然而我	参加库银行录	经验的	推出此為自然	经验证的	
	Public support. Subtract line 5 from line 4	12年代明朝新期期	经验证据	为实现的资料预算保持	利益をある。	制作用自己是对社	1542437.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
-	Amounts from line 4	251,472.	217,711.	85,648.	212,177.	775,429.	<u>1542437.</u>
8	Gross income from interest,						
	dividends, payments received on	:					
	securities loans, rents, royalties,	ļ				J	
	and income from similar sources	86,582.	120,266.	169,360.	165,241.	177,315.	718,764.
9	Net income from unrelated business						
	activities, whether or not the				İ		
	business is regularly carned on						
10	Other income Do not include gain					}	
	or loss from the sale of capital						
	assets (Explain in Part VI)	19,749.	141,534.	100,477.	89,474.	329,530.	
11	Total support. Add lines 7 through 10	新华國國際	REAL BOOK A	THE PROPERTY OF	医心管疾病病	SECONDARY SALES	<u> 2941965.</u>
	Gross receipts from related activities,				[12	
13	First five years. If the Form 990 is for	•	first, second, third	d, fourth, or fifth ta	x year as a section	1 501(c)(3)	
	organization, check this box and stop	- O	· · · · · · · · · · · · · · · · · · ·		· · · -		
	tion C. Computation of Publi						F2 42 ···
	Public support percentage for 2017 (li		-		f	14	52.43 %
	Public support percentage from 2016					15	61.82 %
	33 1/3% support test - 2017. If the o	-			4 IS 33 1/3% or m	ore, cneck this box	k and ►X
	stop here. The organization qualifies a		=				
	33 1/3% support test - 2016. If the o				ime 15 is 33 1/3%	or more, check this	s box
	and stop here. The organization qualit						
	10% -facts-and-circumstances test	-					
	and if the organization meets the "fact			· ·		vi now the organia	zation
	meets the "facts-and-circumstances" t	-					
	10% -facts-and-circumstances test						U% Of
	more, and if the organization meets the						<u> </u>
	organization meets the "facts-and-circle						
18_	Private foundation. If the organization	old not check a b	ox on line 13, 16a	, 100, 1/a, 0r 1/b,		dula A (Form 990 a	

Schedule A (Form 990 or 990-EZ) 2017 ST LUCIE COUNTY, INC

Par	t III	i [Suppor	t Sche	dule for	Organizations	Described in	Section 509(a)(2

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II) Section A. Public Support (e) 2017 Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015(d) 2016(f) Tota 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions. merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b " (" <u>. 4"</u> A 8 Public support. (Subtract line 7c from line 6) Section B. Total Support (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) ... Total support (Add lines 9, 10c, 11, and 12) First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C./Computation of Public Support Percentage Public, support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) % Public support percentage from 2016 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) 17 % % 18 /Investment income percentage from 2016 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2017 732023 10-08-17

Schedule A (Form 990 or 990 EZ) 2017 ST LUCIE COUNTY, INC

'Part IV. Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A. D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Sec	tion A. All Supporting Organizations		
		•	
4	Are all of the organization's supported organizati	ons listed by name in the organization's governing	

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section:509(a)(1) or (2)?-If-"Yes," explain-in-Part VI how-the organization-determined that-the supported-organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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		<u>27-310209</u>	<u>8 P</u>	age !
Ге	Irt IV: Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	100 M	(3)	1,3
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1	1	
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	1372	强感	8
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		192	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		200
	controlled the organization's activities. If the organization had more than one supported organization,		-175	200
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	53.3	10 mg	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		[[]
2	Did the organization operate for the benefit of any supported organization other than the supported	100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		332.1	
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,	I.S.F.		2
	supervised, or controlled the supporting organization	2	l	<u>L</u>
Sec	tion C. Type II Supporting Organizations			
		<u> </u>	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	Marie Sol	7	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		100	
	or management of the supporting organization was vested in the same persons that controlled or managed	Quantity.	233.72	
	the supported organization(s)	1	L	<u> </u>
sec	tion D. All Type III Supporting Organizations			
		Regarder than a	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	AT A TOP OF	4.0	2
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	200 de 1		1 (4) (4)
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	ELECT.	345.4	20 E
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1 35 M	4. m ² 1	e 55
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		G	10.4
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	英的基础	7.55	136
_	the organization maintained a close and continuous working relationship with the supported organization(s).	Test etc.	- This 2	icersi
3	By reason of the relationship described in (2), did the organization's supported organizations have a			200
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	22.22	\$35°	KEE.
	supported organizations played in this regard.	3		L
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see insti	uctions).		
a	The organization is the parent of each of its supported organizations. Complete line 3 below.			
ь	The organization is the parent of each of its supported organizations. Complete line's below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity.	v (see instructions	1	
င	Activities Test. Answer (a) and (b) below.		Yes	No
2	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	装装 (金)	2,344	TEST !!
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			110
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	X31. 1	2,424.20
L	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	1100	\$4.5	
D	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		(E)	
	reasons for the organization's position that its supported organization(s) would have engaged in these	(1) (1) (1)		
		2b	AMERICA:	ECH! ON
2	activities but for the organization's involvement.	P. W. C.	SAN.	1
3	Parent of Supported Organizations. Answer (a) and (b) below. Put the experience have the power to requirely appoint or elect a majority of the officers, directors, or		1	
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3a	H. 1645 45	- - 1
L	trustees of each of the supported organizations? <i>Provide details in Part VI</i> . Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	30 50 50 50 50 50 50 50 50 50 50 50 50 50	100	St.
Ð		3b	. 174% H	يتيو هاراس
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard			

732025 10-08-17

Schedule A (Form 990 or 990-EZ) 2017

SOLAR & ENERGY LOAN FUND OF

	edule A (Form 990 or 990-EZ) 2017 ST LUCIE COUNTY, INC			27-3102098 Page 6
1.0	Irt.V: Type III Non-Functionally Integrated 509(a)(3) Supporting			D-+1/11/0 - 1 - 1 - 1
. 1	Check here if the organization satisfied the Integral Part Test as a qualifying	-	• •	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must c	omplete	Sections A through E.	'(D) Compart Vaca
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		<u> </u>
2	Recovenes of pnor-year distributions	2		<u> </u>
3_	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5_	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or	- 1		
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	- (%	在新疆外外的地方的	是我们是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
	instructions for short tax year or assets held for part of year)	24.7		[1] "是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other	19.28	CELEBORY THE PROPERTY OF	THE PARTY OF THE P
	factors (explain in detail in Part VI)	1	经验证据的	高级的
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		<u> </u>
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	是一种自己的自己的	
2	Enter 85% of line 1	2	[10] · · · · · · · · · · · · · · · · · · ·	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	PRESIDENT AND	
4	Enter greater of line 2 or line 3	4	也不怕是可能是明確認可能	
5	Income tax imposed in prior year	5	医原动物的现在分词形式的	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
-	emergency temporary reduction (see instructions)	6	阿尔克克斯 斯斯斯	
7	Check here if the current year is the organization's first as a non-functional			anization (see
-	instructions).			

Schedule A (Form 990 or 990-EZ) 2017

SOLAR & ENERGY LOAN FUND OF

Schedule A (Form 990 or 990-EZ) 2017 ST LUCIE COUNTY, 27-3102098 Page 7 INC Part V: Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (pnor IRS approval required) Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions. Distributable amount for 2017 from Section C; line 6 Q Line 8 amount divided by line 9 amount (i) (iii) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2017 Amount for 2017 是不 化学能够产品或类型 Distributable amount for 2017 from Section C, line 6 1 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI) See instructions. CHARLES OF THE PARTY OF THE PAR Excess distributions carryover, if any, to 2017 是是是是是一种。 THE THE PROPERTY WAS AND THE PARTY OF THE PA From 2013 c_From 2014 d From 2015 KANALING ALTERNATURE OF THE FOREST OF THE PROPERTY OF THE PROP e From 2016 f Total of lines 3a through e STATE OF THE PARTY **新创新的企业的** g Applied to underdistributions of prior years h Applied to 2017 distributable amount **可以下了。19**57年的 i Carryover from 2012 not applied (see instructions) 是是不是是自動物的 医性性性神经性性病 Remainder. Subtract lines 3g, 3h, and 3ì from 3f. Distributions for 2017 from Section D. a Applied to underdistributions of prior years **第三种语言。第二种语言,是是是一种语言。** b Applied to 2017 distributable amount **罗斯科林斯克科里西** c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2018. Add lines 3j 767年6月16日 and 4c. Breakdown of line 7: a Excess from 2013 b Excess from 2014 等是是12.3%。 第一章 12.3%。 12.3% 1 c Excess from 2015 d Excess from 2016

Schedule A (Form 990 or 990-EZ) 2017

e Excess from 2017

SOLAR & ENERGY LOAN FUND OF ST LUCIE COUNTY, INC

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
•	line 1; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section B, line 1e; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)
	
	<i>(</i>
	
	
	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
➤ Attach to Form 990.

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public 223 inspection 2/2

Name of the organization

SOLAR & ENERGY LOAN FUND OF

Employer identification number

1.5	ST LUCIE COUNTY, 11	NC	27-3102098
Pa	rt 🔀 Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		
	Ĺ	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) [
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	vinting that the assets held in donor advised	I funds
_	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor ad	-	• • • • • • • • • • • • • • • • • • • •
J	for charitable purposes and not for the benefit of the donor of		-
			Yes No
Da	rt II : Conservation Easements. Complete if the org.	anization annuared "Vas" on Form 000. Ba	
			t iv, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ed		cally important land area
	Protection of natural habitat	Preservation of a certifie	d histonc structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	icture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		
•	year >	,	3
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the period		
~	violations, and enforcement of the conservation easements it	L-14-0	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		,. , , ,
0	Start and volunteer flours devoted to mornioring, inspecting, i	landing of violations, and emorcing conser	valion easements during the year
-	Amount of avances included in monitoring increasing bandle	of violations, and enforcing concentration	a consequente dumpa the year
7	Amount of expenses incurred in monitoring, inspecting, handle	ing of violations, and emorcing conservation	reasements during the year
_	> \$	4.700	4)(D)(2)
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(n)(
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes the	organization's accounting for
_	conservation easements.		0:-:1
Pai	t III Organizations Maintaining Collections of		er Similar Assets.
	Complete if the organization answered "Yes" on Form 9		
1a	If the organization elected, as permitted under SFAS 116 (ASC		
	historical treasures, or other similar assets held for public exhib	bition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ-	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statement an	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
			> \$
2	If the organization received or held works of art, historical treas		un provide
~	the following amounts required to be reported under SFAS 116		ang protisso
_	·		▶ ¢
	Revenue included on Form 990, Part VIII, line 1		. • \$
<u> </u>	Assets included in Form 990, Part X		<u> </u>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2017

e; ,,	-	ENERGY L		FUND O	F.					
		E COUNTY,								8 Page 2
Рa	rt III Organizations Maintaining (Collections of A	Art, Hi	storical T	reasures,	or Oth	<u>er Simila</u>	r Asse	ts(contin	ued)
3	Using the organization's acquisition, access	ion, and other reco	rds, che	ck any of th	e following th	nat are a s	significant u	se of its	collection	n items
	(check all that apply):	-								
а	Public exhibition		d 🗀	Loan or ex	change prog	rams				
b	Scholarly research		е 🗀	Other			_			
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and expla	in how	they further	the organiza	tion's exe	mpt purpos	se in Pai	t XIII.	
5	During the year, did the organization solicit of									
•	to be sold to raise funds rather than to be m								Yes	☐ No
Pa	rt IV Escrow and Custodial Arran				_	"Yes" or	Form 990.	Part IV.	line 9. or	
	reported an amount on Form 990, Pa							,		
1a	Is the organization an agent, trustee, custod		diary fo	r contributio	ns or other a	ssets not	included			
	- · · · · · · · · · · · · · · · · · · ·	_	-					-	Yes	- No
h	If "Yes," explain the arrangement in Part XIII				••• •• ••		••••		00	140
U	ii res, explain the analigement in rait XIII	and complete the h	ollowing	tabic.					Amount	
_	Posunning halance						4-		Amount	
C	Beginning balance			••		•	1c			
	Additions during the year				··· ·· ··		1d			
e	Distributions during the year					••••	1e			
f	Ending balance						<u>1f</u> _		7	7
	Did the organization include an amount on F							ـــا	Yes	No
	If "Yes," explain the arrangement in Part XIII.							_•		
Pa	rt V ` Endowment Funds. Complete		1							
		(a) Current year	(b)	Prior year	(c) Two year	ars back	(d) Three yea	ars back	(e) Four	years back
	Beginning of year balance		ļ		<u> </u>					
	Contributions	· — <u>— .</u>	ļ							
C	Net investment earnings, gains, and losses		<u> </u>		ļ					
đ	Grants or scholarships		<u> </u>		<u> </u>					
е	Other expenditures for facilities									
	and programs		L							
f	Administrative expenses				<u> </u>					
g	End of year balance				<u></u>					
2	Provide the estimated percentage of the curr	ent year end baland	ce (line 1	lg, column (a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%	_							
C	Temporarily restricted endowment ▶	<u>~~</u>								
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.								
За	Are there endowment funds not in the posse		ation th	at are held a	and administ	ered for tl	ne organizat	tion		
	by:						Ū		5	res No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations					•••••		• ••	3a(ii)	$\overline{}$
h	If "Yes" on line 3a(ii), are the related organiza		red on S		·	•	••	•	3b	
4	Describe in Part XIII the intended uses of the									
	t VI Land, Buildings, and Equipm		, , , , , , , , , , , , , , , , , , ,			 -				
	Complete if the organization answered		0. Part I	V. line 11a. S	See Form 99	0. Part X.	line 10.			
	Description of property	(a) Cost or o		1	or other		cumulated		(d) Book	value
	Description of property	basis (investr		, , ,	(other)		reciation	- 1	(u) Dook	Va.50
4-	Land	240.0 (11140311			,			* 		
	Land	 						+		
	Buildings				2,293.		2,293	2		0.
	Leasehold improvements	·		77	9,195.		72,592			,603.
	Equipment	·	_	 /	7,170.		14,534		0	,003.
	Other			(2)	10-1					602
otal	. Add lines 1a through 1e. (Column (d) must ed	nuai Form 990. Part	x, colur	ກກ (Β). line 1	IUC.)			-		<u>,603.</u>

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 ST LUCIE CO	OUNTY, INC	·	2	7-3102098 Page
Part VII Investments - Other Securities.		-		<u>.</u> ^
Complete if the organization answered "Yes				
(a) Description of Security or category (including name of security)	(b) Book valu	e (c) Method of	valuation: Cost or e	end-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other	 	. — — — — — — — — — — — — — — — — — — —		
(A)	 			
(B)				
(C)	 			
(D)	 			
(E)				
	<u> </u>			
(G)	 			
(H)		(.* ASS Mar 24: 3 m)		1 MARKET - TO A TAKE OF THE TO A TO THE TO
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<u> </u>	RICH MEN SCHOOL	特别的特别。"加克尔 ·	。以其中對於中央領域的
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes'				
(a) Description of investment	(b) Book value	e (c) Method of	valuation: Cost or e	nd-of-year market value
				
(2)	<u> </u>			
(3)				
(5)	<u></u>			
(6)				
				
(8)	<u> </u>		 	
(9)		WE COMMENT WATER	CONTRACTOR AS ASSESSMENT OF THE PROPERTY OF TH	MASSES - PROVIDE NAME AND IN
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	<u> </u>	Mile of Sale of the Sale of the	Profesion Branch	法是法律,进行政治院
Part IX Other Assets.				
Complete if the organization answered "Yes"		V, line 11d. See Form 990	, Part X, line 15.	# N Do all control
_ ``	Description			(b) Book value
				
(2)				
(3)			 	
- (4)				
(5)				
				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X: Other Liabilities.	e 15.) .		₽	`
	F 000 D-d !!	U has dds suddf Cos Fam	000 Day V I 0	c
Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part I	(b) Book value	11 990, Fart X, IIII 2	o. Designation of the state of
16		(b) DOOK VAILED	the feet at the second	
(1) Federal income taxes (2) DEPOSITS PAYABLE		158,070.	TO THE STATE OF TH	
		130,070.	THE RESERVE OF THE PARTY OF THE	The second of th
(3)			14227530663375312	with the control of t

1. (a) Des	cription of liability	(b) Book value	」條係,對極複雜	
(1) Federal income taxes				
(2) DEPOSITS PAYA	BLE	158,070.	对在10年的	
(3)				
(4)				
(5)			To me all and	
(6)				
(7)				
(8)			Telong Telegraph	
(9)				学院基础
Total. (Column (b) must equal Form	n 990, Part X, col. (B) line 25.)	▶ 158,070.		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

SCHEDULE O

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for the latest information.

SOLAR & ENERGY LOAN FUND OF

Employer identification number 27 – 31 0 2 0 9 8

SI DOCIE COUNTY, INC
Form 990, Part I, Line 1, Description of Organization Mission:
FAVORABLE FINANCING OPTIONS, STIMULATING ECONOMIC PROSPERITY, SERVING
UNDERSERVED AREAS AND FACILITATING EDUCATIONAL AWARENESS.
Form 990, Part VI, Section B, line 11b:
THE RETURN IS PROVIDED TO THE BOARD FOR REVIEW BEFORE FILING.
Form 990, Part VI, Section B, Line 15:
BOARD OF DIRECTORS APPROVE COMPENSATION. PART OF MEETING MINUTES.
Form 990, Part VI, Section C, Line 19:
AVAILABLE UPON REQUEST